

<b>SERIAL NUMBER</b> <p style="text-align: center;">09/185,607</p>	<b>FILING DATE</b> <p style="text-align: center;">11/04/98</p>	<b>CLASS</b> <p style="text-align: center;">435</p>	<b>GROUP ART UNIT</b> <p style="text-align: center;">1643</p>	<b>ATTORNEY DOCKET NO.</b> <p style="text-align: center;">018733/0875</p>
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**APPLICANT**

SHUI-ON LEUNG, MADISON, NJ; WILLIAM J. MCBRIDE, SUMMIT, NJ; ZHENGXING QU, WARREN, NJ; HANS HANSEN, MYSTIC ISLAND, NJ.

  
  

**\*\*CONTINUING DOMESTIC DATA\*\*\*\*\***  
VERIFIED PROVISIONAL APPLICATION NO. 60/064,386 11/06/97 LRH

  
  

**\*\*371 (NAT'L STAGE) DATA\*\*\*\*\***  
VERIFIED  
NONE

  
  
  

**\*\*FOREIGN APPLICATIONS\*\*\*\*\***  
VERIFIED  
NONE

  
  
  

FOREIGN FILING LICENSE GRANTED 11/20/98
\*\*\*\*\* SMALL ENTITY \*\*\*\*\*

Foreign Priority claimed 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> <p style="text-align: center;">NJ</p>	<b>SHEETS DRAWING</b> <p style="text-align: center;">0</p>	<b>TOTAL CLAIMS</b> <p style="text-align: center;">37</p>	<b>INDEPENDENT CLAIMS</b> <p style="text-align: center;">2</p>
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**ADDRESS**

FOLEY & LARDNER  
 SUITE 500  
 3000 K STREET NW  
 WASHINGTON DC 20007-5300

**TITLE**

LANDSCAPED ANTIBODIES AND ANTIBODY FRAGMENTS FOR CLINICAL USE

<b>FILING FEE RECEIVED</b>  <p style="text-align: center;">\$852</p>	<b>FEES: Authority has been given in Paper</b> No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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